B1 (Official	Form 1)(12	/07)											
			United So			ruptcy t of Ohi					Vol	untary P	etition
Name of Do Staley, I	,	ividual, ent	er Last, First,	, Middle):					ebtor (Spouse ey, Denise		, Middle):		
All Other Na (include ma			or in the last are names):	8 years			(inclu	de married,	used by the a maiden, and			years	
Last four dig	_	Sec./Compl	lete EIN or ot	ther Tax I	D No. (if mo	re than one, star		our digits o		omplete EIN	or other Ta	ax ID No. (if mor	e than one, state all)
6596 Qւ	ess of Debto uail Creek Vincheste	Drive	Street, City, a	and State)	_	ZIP Code 43110	659 Ca	96 Quail	f Joint Debtor Creek Dri chester, Ol	ve	eet, City, a	_	ZIP Code 43110
County of R Franklin		of the Princ	cipal Place of	f Business		10110		y of Reside I nklin	ence or of the	Principal Pla	ace of Busi		10110
Mailing Add	dress of Deb	otor (if diffe	erent from stre	eet addres	ss):		Mailir	g Address	of Joint Debt	tor (if differe	nt from stre	et address):	
					Г	ZIP Code						Г	ZIP Code
Location of (if different			siness Debtor ove):		<u>'</u>		•					1	
See Exhi	(Check all (includes ibit D on partion (include	ge 2 of this es LLC and one of the a	form. LLP) bove entities,	Sing in I Rail Stock	Ith Care Bugle Asset Road 1 U.S.C. § road kbroker modity Bruning Bank er Tax-Exe (Check box tor is a tax- er Title 26 of	eal Estate as 101 (51B)	e) anization d States	defined "incurr	the 1 der 7 der 9 der 11 der 12	Petition is Fi	led (Check napter 15 P a Foreign I napter 15 P a Foreign I e of Debts c one box)	Under Which one box) etition for Reco Main Proceedin etition for Reco Nonmain Proce	ng pgnition peding primarily
☐ Filing Feattach signs unable	gned applicate to pay fee ee waiver re	hed I in installmation for the except in in quested (ap	nents (applica e court's cons stallments. R oplicable to cl e court's cons	able to ind sideration Rule 1006 hapter 7 in	certifying t (b). See Offi ndividuals o	hat the debt cial Form 3A only). Must	tor Check	Debtor is if: Debtor's ato insiders all applica A plan is Acceptance	a small busin not a small b aggregate not s or affiliates; able boxes: being filed w ces of the pla	ncontingent li ncontingent li n are less than with this petition were solici	defined in or as define iquidated da \$2,190,00 on.	11 U.S.C. § 10 d in 11 U.S.C. ebts (excluding 0.	§ 101(51D).
Debtor e	estimates that estimates that	it funds will it, after any	ation * l be available exempt prop for distributi	for distri	bution to un cluded and	administrat	editors.	es paid,		THIS	SPACE IS I	FOR COURT USI	E ONLY
Estimated N 1- 49	Number of C: 50- 99	reditors 100- 199	200-	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000				
Estimated A \$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion					
Estimated L \$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion					

B1 (Official Form 1)(12/07) Page 2 Name of Debtor(s): Voluntary Petition Staley, Barry S (This page must be completed and filed in every case) Brown-Staley, Denise All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Michael A. Cox **December 10, 2007** Signature of Attorney for Debtor(s) (Date) Michael A. Cox 0075218 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

B1 (Official Form 1)(12/07)

Voluntary Petition

(This page must be completed and filed in every case)

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Barry S Staley

Signature of Debtor Barry S Staley

X /s/ Denise Brown-Staley

Signature of Joint Debtor Denise Brown-Staley

Telephone Number (If not represented by attorney)

December 10, 2007

Date

Signature of Attorney*

X /s/ Michael A. Cox

Signature of Attorney for Debtor(s)

Michael A. Cox 0075218

Printed Name of Attorney for Debtor(s)

Hall, Guerrieri & Cox

Firm Name

2500 N. High Street Suite 100 Columbus, OH 43202

Address

Email: hgclaw@sbcglobal.net

(614) 267-2871 Fax: (614) 267-2873

Telephone Number

December 10, 2007

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Staley, Barry S Brown-Staley, Denise

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

7	v
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Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

United States Bankruptcy Court Southern District of Ohio

	Case No.	
Debtor(s)	Chapter	13
	Debtor(s)	

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None П

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT \$47,980.59	SOURCE Mr. 2007 Income to date from employment.
\$50,819.00	Mr. 2006 Income from employment.
\$4,241.00	Mr. 2005 Income from employment.
\$14,206.46	Mrs. 2007 Income to date from employment.
\$7,877.00	Mrs. 2006 Income from employment.
\$24,492.00	Mrs. 2005 Income from employment.

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL OF CREDITOR **PAYMENTS** AMOUNT PAID **OWING**

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT DATES OF PAID OR PAYMENTS/ VALUE OF AMOUNT STILL NAME AND ADDRESS OF CREDITOR TRANSFERS **TRANSFERS OWING**

None

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND

AMOUNT STILL

RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT COURT OR AGENCY STATUS OR NATURE OF PROCEEDING AND CASE NUMBER AND LOCATION DISPOSITION 2007 CVF 044516 H & S **COMPLAINT FOR** Franklin County Municipal **CLOSED** FINANCIAL INC vs. STALEY, CONTRACTS/NOTES/ACCO Court, Franklin County, OH **BARRY** UNTS 2006 CVE 038408 STALEY, COMPLAINT FOR OPEN Franklin County Municipal **DENISE** A et al vs. PERSONAL Court, Franklin County, OH

UMSTATTD A MINOR, COLIN INJURY/PROPERTY M et al (Cheek and Zeehandler)

DAMAGE

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF REPOSSESSION.

NAME AND ADDRESS OF CREDITOR OR SELLER **United Auto Credit**

250 E. Wilson Bridge

Columbus, OH 43085

Central Ohio Credit Corp. 2040 Brice Road Reynoldsburg, OH 43068

DESCRIPTION AND VALUE OF FORECLOSURE SALE. TRANSFER OR RETURN **PROPERTY** 2006

1999 Isuzu Rodeo

Debtor owed more than FMV

2005 1997 Dodge Caravan

Debtor owed more than FMV

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE

ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN

NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE Hall, Guerrieri & Cox 2500 North High Street Suite 100 Columbus, OH 43202 DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$500.00 for attorney fees

Money Managment International 9009 West Loop South 7th Floor Houston, TX 77096-1719 \$30.00 for consumer credit counseling.

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

US Bancorp 225 Asylum Street Hartford, CT 06103

Fifth Third PO Box 182026 Columbus, OH 43218 TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

Checking Account

Checking Account

AMOUNT AND DATE OF SALE OR CLOSING

Closed with Negative Balance 2006

Closed in 2005 with negative

balance

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS 601 E Kossuth Street Columbus, OH 43206-2414 NAME USED

Denise Brown-Staley
Barry Staley

DATES OF OCCUPANCY **11/2007**

4/2006

1195 S. Hamilton Road Columbus, OH 43227-1344

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

TE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL

SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the

docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

TAXPAYER-I.D. NO.

(ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

ENDING DATES

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

NAME ADDRESS

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	December 10, 2007	Signature	/s/ Barry S Staley	
			Barry S Staley	
			Debtor	
Date	December 10, 2007	Signature	/s/ Denise Brown-Staley	
		-	Denise Brown-Staley	
			Joint Debtor	

 $Penalty\ for\ making\ a\ false\ statement:\ Fine\ of\ up\ to\ \$500,000\ or\ imprisonment\ for\ up\ to\ 5\ years,\ or\ both.\ 18\ U.S.C.\ \S\$\ 152\ and\ 3571$

Official Form 1, Exhibit D (10/06)

United States Bankruptcy Court Southern District of Ohio

	Barry S Staley			
In re	Denise Brown-Staley		Case No.	
		Debtor(s)	Chapter	13

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.] ____

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

Official Form 1, Exh. D (10/06) - Cont.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of realizing and making rational decisions with respect to
financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or
through the Internet.);
☐ Active military duty in a military combat zone.
□ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: /s/ Barry S Staley
Barry S Staley
Date: <u>December 10, 2007</u>

<u>Cert</u>	CIFICATE OF COUNSELING
I CERTIFY that on	, at o'clock,
	received from
	11 U.S.C. § 111 to provide credit counseling in the
	, an individual [or group] briefing that complie
with the provisions of 11 U.S.C.	. §§ 109(h) and 111.
A debt repayment plan	If a debt repayment plan was prepared, a copy of
the debt repayment plan is attacl	hed to this certificate.
This counseling session was con	nducted
Date:	By
	Name
	Title

Official Form 1, Exhibit D (10/06)

United States Bankruptcy Court Southern District of Ohio

	Barry S Staley			
In re	Denise Brown-Staley		Case No.	
		Debtor(s)	Chapter	13

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.] ____

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

Official Form 1, Exh. D (10/06) - Cont.

A I am not required to receive a gradit counciling briefing because of [Check the gradies hle
☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of realizing and making rational decisions with respect to
financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or
through the Internet.);
☐ Active military duty in a military combat zone.
Active minitary duty in a minitary combat zone.
□ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling
requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: /s/ Denise Brown-Staley
Denise Brown-Staley
Date: December 10, 2007

<u>Cert</u>	CIFICATE OF COUNSELING
I CERTIFY that on	, at o'clock,
	received from
	11 U.S.C. § 111 to provide credit counseling in the
	, an individual [or group] briefing that complie
with the provisions of 11 U.S.C.	. §§ 109(h) and 111.
A debt repayment plan	If a debt repayment plan was prepared, a copy of
the debt repayment plan is attacl	hed to this certificate.
This counseling session was con	nducted
Date:	By
	Name
	Title

United States Bankruptcy Court Southern District of Ohio

In re	Barry S Staley,		Case No	
	Denise Brown-Staley		_	
-		Debtors	Chapter	13

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	6,209.11		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		3,214.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		8,073.78	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	10		48,553.30	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			3,171.46
J - Current Expenditures of Individual Debtor(s)	Yes	2			2,791.46
Total Number of Sheets of ALL Schedu	iles	24			
	To	otal Assets	6,209.11		
			Total Liabilities	59,841.08	

United States Bankruptcy Court Southern District of Ohio

In re	Barry S Staley,		Case No.	
	Denise Brown-Staley			
_		Debtors	Chapter	13

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	8,073.78
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	8,073.78

State the following:

Average Income (from Schedule I, Line 16)	3,171.46
Average Expenses (from Schedule J, Line 18)	2,791.46
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	6,186.64

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	6,892.07	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		1,181.71
4. Total from Schedule F		48,553.30
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		49,735.01

In re

Barry S Staley, Denise Brown-Staley

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property Husband, Wife, Joint, or Community Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Amount of Secured Claim

None

Sub-Total > **0.00** (Total of this page)

Total > **0.00**

(Report also on Summary of Schedules)

In re	Barry S Staley,
	Denise Brown-Staley

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand		Cash on hand in the possession of Debtor(s)	-	7.85
2.	accounts, certificates of deposit, or		Funds available to Debtors in a Checking account at Wood Forest National Bank	Н	15.50
	shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Funds available to Debtors in a Savings account at Wood Forest Bank	W	45.76
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	including audio, video, and		Household Goods and Furnishings in the possession of Debtors	J	700.00
	computer equipment.		Gym Equipment	J	150.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6.	Wearing apparel.		Wearing apparel in the possession of Debtor(s)	-	125.00
7.	Furs and jewelry.		Miscellaneous furs and jewelry. mostly costume	-	30.00
8.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		Life insurance policy [no cash value] term life through current employer	-	0.00
10.	Annuities. Itemize and name each issuer.	X			

(Total of this page)

Sub-Total >

1,074.11

² continuation sheets attached to the Schedule of Personal Property

In re	Barry S Staley,
	Denise Brown-Stale

Case No.

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	Х			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	x			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	x			
				Sub-Tota	al > 0.00
			(T	otal of this page)	

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

In re	Barry S Staley,
	Denise Brown-Staley

Case No.		
Cube 110.		

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community Wife, Secured Claim or Executed Claim	
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.		A 1999 Oldsmobile Silhouette with 128,016 miles air sensor flow bad, compressor bad.	Н	3,585.00
			A 1992 Oldsmobile Cutlas with 90,227	Н	1,550.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > (Total of this page)

5,135.00

Total >

6,209.11

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

In re

Barry S Staley, Denise Brown-Staley

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:	☐ Check if debtor claims a homestead exemption that exceeds
(Check one box)	\$136,875.
☐ 11 U.S.C. §522(b)(2)	
11 U.S.C. §522(b)(3)	

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Cash on Hand Cash on hand in the possession of Debtor(s)	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	7.85	7.85
Checking, Savings, or Other Financial Accounts, C Funds available to Debtors in a Checking account at Wood Forest National Bank	Certificates of Deposit Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	15.50	15.50
Funds available to Debtors in a Savings account at Wood Forest Bank	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	45.76	45.76
Household Goods and Furnishings Household Goods and Furnishings in the possession of Debtors	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)	700.00	700.00
Gym Equipment	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)	150.00	150.00
Wearing Apparel Wearing apparel in the possession of Debtor(s)	Ohio Rev. Code Ann. § 2329.66(A)(3)	125.00	125.00
<u>Furs and Jewelry</u> Miscellaneous furs and jewelry. mostly costume	Ohio Rev. Code Ann. § 2329.66(A)(4)(c)	30.00	30.00
Interests in Insurance Policies Life insurance policy [no cash value] term life through current employer	Ohio Rev. Code Ann. §§ 2329.66(A)(6)(b), 3911.10, 3911.12, 3911.14	0.00	0.00
Automobiles, Trucks, Trailers, and Other Vehicles A 1999 Oldsmobile Silhouette with 128,016 miles	Ohio Rev. Code Ann. § 2329.66(A)(2) Ohio Rev. Code Ann. § 2329.66(A)(18)	1,000.00 85.00	3,585.00

Total:	2.159.11	4.659.11

air sensor flow bad, compressor bad.

In re Barry S Staley, **Denise Brown-Staley**

Case No.	

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C Hu	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	N T I N G	HPU-CD-LZC	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. 2508490157			2007] T	T E D	Ī		
Michaels Auto Sales 1766 Parsons Ave. Columbus, OH 43207		J	PMSI A 1999 Oldsmobile Silhouette with 128,016 miles air sensor flow bad, compressor bad.		D			
		L	Value \$ 3,585.00	Ш			2,500.00	0.00
Account No. 9345			2007					
Mona Auto Sales 1484 Parsons Ave. Columbus, OH 43207		J	PMSI A 1992 Oldsmobile Cutlas with 90,227					
			Value \$ 1,550.00	1			714.00	0.00
Account No.			Value \$					
Account No.				П				
			Value \$					
continuation sheets attached			(Total of t	Subto			3,214.00	0.00
			Total (Report on Summary of Schedules)				3,214.00	0.00

In re

Barry S Staley, **Denise Brown-Staley**

Case No.	

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total

also on the Statistical Summary of Certain Liabilities and Related Data.
Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
■ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

^{*} Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re Barry S Staley,
Denise Brown-Staley

Case No.			

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ODEBTOR ONTINGENT NLIQUIDATED AND MAILING ADDRESS SPUTED Н DATE CLAIM WAS INCURRED AMOUNT W INCLUDING ZIP CODE, AND CONSIDERATION FOR CLAIM OF CLAIM C AMOUNT ENTITLED TO PRIORITY AND ACCOUNT NUMBER (See instructions.) 10/29/07 Account No. see ssn Collection **Columbus City Treasurer** 0.00 Income Tax Division, 4th Floor 50 W. Gay St. J Columbus, OH 43215 1,009.04 1,009.04 Account No. 1107782139 2001 **Back Child Support** Florida Child Support Enforcement 0.00 Agency 703B West 15th Street J Panama City, FL 32401 5.000.00 5,000.00 Account No. 182-52-5964 09/04/06 Collection of past due taxes **Internal Revenue Service** 1,181.71 PO BOX 970024 Saint Louis, MO 63197-7364 J 1,181.71 0.00 Account No. 184-56-6928 12/31/04 Collection of past due taxes Internal Revenue Service 0.00 PO BOX 970024 Saint Louis, MO 63197-7364 J 883.03 883.03 Account No. Subtotal 1,181.71 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 8,073.78 6,892.07 1,181.71

(Report on Summary of Schedules)

6,892.07

8,073.78

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In re	Barry S Staley,
	Denise Brown-Staley

Case No.	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu: H V J C		COXHLXGEX	N L L Q L	DISPUTED		AMOUNT OF CLAIM
Account No. 018254257-02			9/18/07	Ť	T E D			
Afni, Inc. 404 Brock Dr. P.O. Box 3427 Bloomington, IL 61702		J	Collection of Verizon Pennsylvania, Inc.		D			109.06
Account No. 3181544		Г	2000		Г	Г	T	
American Electric Power P.O. Box 24418 Canton, OH 44701-4418		J	Collection					587.37
Account No. see ssn		Н	1/2007	+	H	H	\dagger	
Andrew J. Conti 4694 Cemetary Road Box 282 Hilliard, OH 43026		J	Landlord					2,000.00
Account No. multiple accounts		Г	09/01/06		Н		\dagger	
Asset Acceptance LLC P.O. Box 2036 Warren, MI 48090		J	Collection of SBC Ohio					
								112.34
9 continuation sheets attached			(Total of t	Subt				2,808.77

In re	Barry S Staley,
	Denise Brown-Staley

Case No.	

CREDITOR'S NAME,	CO	Н	usband, Wife, Joint, or Community	CO	U N	[)	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ODEBTOR	A N H	CONSIDERATION FOR CLAIM. IF CLAIM	NTINGEN			⊢ 1	AMOUNT OF CLAIM
Account No. CE2254			03/21/07	٦ [T E D		ſ	
AssetCare, Inc. 5100 Peachtree Industrial Blvd. Norcross, GA 30071		J	Collection of InoVision		В			815.42
Account No. 9175369			Opened 3/31/06 Last Active 11/01/07		T	T	7	
Calvary Portfolio Services 7 Skyline Dr 3rd Floor Hawthorne, NY 10532		W	Collection 01 At T					450.00
					L	ļ	\downarrow	156.00
Account No. T660346 Cen Oh Cred 2040 Brice Rd Box 210 Reynoldsburg, OH 43068		J	Opened 2/01/02 Last Active 3/01/05 Automobile					3,095.00
Account No. 2006 CVE 038408			2006			T	T	
Cheek & Zeehandler 471 E. Broad Street 12th Floor Columbus, OH 43215		J	Notice only					0.00
Account No. 17340724 001 000 9			10/23/07		T	Ť	7	
Columbia Gas of Ohio 200 Civic Center Dr., 11th Floor Columbus, OH 43215		J	Collection of Utilities					500.00
Sheet no1 of _9 sheets attached to Schedule of			\$	Subt	tota	al	7	4,566.42
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pas	ge`) l	4,300.42

In re	Barry S Staley,
	Denise Brown-Staley

Case No.	

CREDITOR'S NAME,	CO	Н	sband, Wife, Joint, or Community		CO	U N	D I	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ODEBTOR	J M H	DATE CLAIM WAS INCURRED A CONSIDERATION FOR CLAIM. IF CI IS SUBJECT TO SETOFF, SO STA	LAIM	CONTINGEN	UZL-QU-DAH		AMOUNT OF CLAIM
Account No. 802490197 0			6/26/07		Т	T E D		
Computer Collections Inc. 640 West Fourth Street P.O. Box 5238 Winston Salem, NC 27113-5238		J	Collection of Childrens Hospital			D		91.00
Account No. 0712720595			05/07/07					
Computer Collections Inc. 640 West Fourth Street P.O. Box 5238 Winston Salem, NC 27113-5238		J	Collection of Grant Med. Center					353.94
Account No. multiple accounts	t		11/09/07					
Credit Protection Association PO Box 9037 Addison, TX 75001		J	Collection of Time Warner Cable					350.00
Account No.	╁	T	11/21/07			H		
Dana & Pariser Co., LPA 800 E. Broad St. Columbus, OH 43205		J	Collection of HARDWICK INC					2,001.50
Account No. 456275	╁	+	Opened 3/01/04 Last Active 1/01/07			\vdash		_,
Danapariser 800 East Broad Str Columbus, OH 43205		W	09 Gregory Lee Frakes					936.00
Sheet no. 2 of 9 sheets attached to Schedule of						tota		3,732.44
Creditors Holding Unsecured Nonpriority Claims			(Total of th	nis 1	pag	e)	3,732.44

In re	Barry S Staley,	Case No.
	Denise Brown-Staley	

	1.	1		-	1	-	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	CONSIDERATION FOR CLAIM. IF CLAIM	CONTINGEN	Q	DISPUTED	AMOUNT OF CLAIM
Account No. 757184566928STALE			2003	Т	E D		
Department of Veterans Affairs P.O. Box 530269 Atlanta, GA 30353-0268		J	Medical Bill				28.57
Account No. PAM566928	-	H	Opened 5/24/02		+	┢	
Driver Solutions Inc 3603 E Raymond St Indianapolis, IN 46203		н	Educational				8,000.00
Account No. 820069070903	-	H	Opened 7/09/03 Last Active 8/01/03	+	╁	-	
Federal Adjustment Bur 4640 Executive Dr Columbus, OH 43220	-	W	Collection Hamilton Arms				370,00
Account No. 3951385		H	Opened 6/16/03 Last Active 11/01/07	+			070.00
Ffcc-columbus Inc 1550 Old Henderson Rd St Columbus, OH 43220	-	н	Collection Dental				61.00
Account No. see ssn	\vdash	\vdash	2005	+	+	\vdash	
Fifth Third PO Box 182026 Columbus, OH 43218	-	J	Account Deficiency				500.00
Sheet no. 3 of 9 sheets attached to Schedule of		_		Sub	tota	ıl	
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	8,959.57

In re	Barry S Staley,
	Denise Brown-Staley

Case No.	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	ļç	Ñ	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER	ОДШВНО	J H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTING	UNLLQU.	SPUTE	AMOUNT OF CLAIM
(See instructions above.)	R	С	is subject to setort, so state.	N G E N	Ϊ́	Ď	
Account No. see ssn			2005	∀ ₹	I D A T E D		
Account 140. 300 3011			Loan		E		
First American Cash Advance							1
3329 E. Broad Street		J					
Columbus, OH 43213							
							370.00
				\bot	_	L	
Account No. 1005348320			09/06/06				
			Collection of Fingerhut				
First National Collection Bureau		١.					
610 Waltham Way		J					
Sparks, NV 89434							
							352.72
Account No. see ssn			2003	1			
			Services Performed				
H & R Block							
3737 N. High St.		J					
Columbus, OH 43214							
, in the second							
							206.00
Account No. 714566928			Opened 3/08/04	+	┢		
Account No. 7 14300320			FactoringCompanyAccount C1 Professional				
H & S Financial			Training Ctr.				
804 Office Park Cir		Н					
Lewisville, TX 75057							
Lowisvino, 17. 10001							
							4,129.00
A		_	05/07/07	+	\vdash	\vdash	, , ,
Account No. 0066723683-11346425			05/07/07 Collection of Mid-OH Emerg Serv.		ĺ		
UPPG			Conection of whaton Effery Serv.				
HRRG		J			1		
PO Box 189053					1		
Fort Lauderdale, FL 33318-9053							
							52.50
							52.50
Sheet no. 4 of 9 sheets attached to Schedule of			;	Sub	tota	1	E 440 00
Creditors Holding Unsecured Nonpriority Claims			(Total of	his	pa₽	re)	5,110.22

In re	Barry S Staley,
	Denise Brown-Staley

Case No.		

CDEDITORIS NAME	С	Н	usband, Wife, Joint, or Community	Тс	Τυ	T	σТ	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	CONTINGENT	Q U I D	<u>.</u> 1	I S P U T E D	AMOUNT OF CLAIM
Account No. 0321511			2006	Ť	A T E D		ſ	
LVNV Funding PO Box 10497 Greenville, SC 29603		J	Collection		D			326.30
Account No. 5660741	T	T	05/01/07	T	T	T	7	
Michael Igoe PO Box 20430 Columbus, OH 43215		J	Notice only					0.00
Account No. 37137522			Opened 4/24/07 Last Active 11/01/07	T	T	t	\dagger	
NCO - Medclr Po Box 41567 Philadelphia, PA 19101		W	FactoringCompanyAccount Med1 02 Mid Ohio Emerg Svcs Llc					305.00
Account No. 21318523	t		Opened 6/29/04 Last Active 11/01/07	t	\dagger	t	\dagger	
NCO - MedcIr Po Box 41567 Philadelphia, PA 19101		н	FactoringCompanyAccount Med1 02 Mid Ohio Emerg Svcs Llc					242.00
Account No. 0231620182	┝	╁	2003	+	+	+	\dashv	242.00
Ohio Health 3728 Olentangy River Road Columbus, OH 43214		J	Medical					1,213.20
Sheet no5 of _9 sheets attached to Schedule of				Sub			7	2,086.50
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge) [_,;;;

In re	Barry S Staley,
	Denise Brown-Staley

Case No.	

CREDITOR'S NAME,	Ç	Ηι	sband, Wife, Joint, or Community	C	U	ļ	7	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ODE BT OR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	Q U			AMOUNT OF CLAIM
Account No. 4412254			Opened 5/01/06 Last Active 6/01/06	Т	T E D			
Osi Collect/collection Agency 5626 Frantz Rd Dublin, OH 43017		W	Med1 02 Grant Medical Center		D			782.00
Account No. 907620687		T	2005		T	T	7	
OSU Radiology, LLC PO Box 634129 Cincinnati, OH 45263-4129		J	Medical Bill					83.00
Account No. 1100888955	t		Opened 4/01/02 Last Active 5/01/02		T	t	\dagger	
Park Dansan Collections Po Box 248 Gastonia, NC 28053		W	Mci Communications					96.00
Account No. 006001692786	1		2002	T	T	T	†	
Patient Financial Services 1375 Perry St. Columbus, OH 43201-3177		J	Medical Bill					411.00
Account No. 18397690969	t		08/13/07	T	T	t	\dagger	
RJM Acquisition Funding 575 Underhill Blvd. Suite 2 Syosset, NY 11791		J	Collection of Fingerhut					191.35
Sheet no. 6 of 9 sheets attached to Schedule of		•		Sub	tota	al	T	4 562 25
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	nas	ge)	, I	1,563.35

In re	Barry S Staley,
	Denise Brown-Staley

Case No.	

CREDITOR'S NAME,	Ç	Hu	sband, Wife, Joint, or Community		C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ODEBTOR	H W J	CONSIDERATION FOR CLAIM. IF C IS SUBJECT TO SETOFF, SO STA	LAIM	CONF_NG	NLIQUIDATED	SPUTED	AMOUNT OF CLAIM
Account No. 5890366			Opened 11/08/06 Last Active 7/01/07		Т	E		
Rossman & Co Po Box 29917 Columbus, OH 43229		w	Collection Grant Medical Center-2nds			D		782.00
Account No. 5149218			Opened 12/07/05 Last Active 7/01/07					
Rossman & Co Po Box 29917 Columbus, OH 43229		w	Collection Riverside Meth Hosp-2nds					400.00
								100.00
Account No. 302139581-5 Trinsic 100 Brookwood Road Atmore, AL 36502-3513		J	2006 Loan					211.82
Account No. 73173001752			Opened 7/28/05 Last Active 6/22/06					
United Auto Credit Co 17752 Sky Park Cir Ste 1 Irvine, CA 92614		н	Automobile					5,162.00
Account No. 12441988			Opened 7/06/04 Last Active 9/01/04					
United Collection Bureau Po Box 140190 Attn: Customr Service Toledo, OH 43614		w	Collection Columbia Gas Of Ohio Inc					583.00
Sheet no7 of _9 sheets attached to Schedule of				S	ubt	ota	l	6,838.82
Creditors Holding Unsecured Nonpriority Claims				(Total of th	iis	pag	e)	0,030.02

In re	Barry S Staley,
	Denise Brown-Staley

Case No.	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE,	CODE	H		CONT	コスムーのコ.	DISP	
AND ACCOUNT NUMBER (See instructions above.)	O D E B T O R	C	CONSIDERATION FOR CLAIM. IF CLAIM	NGEN	QU I DAT	ΙF	
Account No. 15388579			Opened 12/06/05	Ť	T E D		
United Collection Bureau Po Box 140190 Attn: Customr Service Toledo, OH 43614		н	Collection Osu Emergency Medicine Llc		<i>D</i>		160.00
Account No. 10297918	t		Opened 7/01/03 Last Active 8/01/03	T			
United Collection Bureau Po Box 140190 Toledo, OH 43614		н	Med1 Columbus Radiology Corp				
							99.00
Account No. 16676866 United Collection Bureau Po Box 140190 Attn: Customr Service Toledo, OH 43614		W	Opened 6/30/06 Collection Columbus Radiology Corp				
					L		36.00
Account No. A 945448193 United Healthcare Insurance Company PO BOX 981502 EI Paso, TX 79998-1502		J	07/27/07 Collection				51.00
Account No. see ssn	T		2005				
US Bank, NA Bankruptcy/Recovery Dept PO Box 5229 Cincinnati, OH 45201		J	Unpaid balance				736.71
Sheet no. 8 of 9 sheets attached to Schedule of	_			Subt	L	<u>L</u>	100.71
Creditors Holding Unsecured Nonpriority Claims (Total of							1,082.71

In re	Barry S Staley,	Case No.			
	Denise Brown-Staley				

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) Account No. 1825259641	CODEBTOR	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. Opened 3/13/02 Last Active 4/01/06	CONTINGENT	DZL_QU_DAFED	DISPUTED	AMOUNT OF CLAIM
			Educational	\vdash	D		-
Us Dept Of Education Po Box 5609		w					
Greenville, TX 75403		**					
Greenvine, 17. 70400							
							10,512.00
Account No. multiple accounts	╁	┝	Opened 4/04/07 Last Active 6/01/07	+		┢	·
Account No. multiple accounts	ł		Colections for Sprint				
West Asset Management							
Po Box 2308		J					
Sherman, TX 75091							
							1,200.00
Account No. 113480			3/13/03				
	1		Collection				
Whitehall Medical Center		١.					
100 W. Third Ave.		J					
Columbus, OH 43201							
							92.50
	L			丄			92.50
Account No.	1						
Account No.	╁	H		+		H	
Ticedum 110.	1						
				\perp			
Sheet no. 9 of 9 sheets attached to Schedule of			2	Subt	tota	ıl	11 904 50
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	11,804.50
				Т	ota	ıl	
			(Report on Summary of So				48,553.30

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111	10

Barry S Staley, Denise Brown-Staley

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

In re	Barry S Staley,
	Denise Brown-Staley

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

	Barry S Staley
In re	Denise Brown-Staley

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SCHEDULE I - CURI	RENT INCOME	OF INDIVIDUAL	DEBTOR(S)

Case No.

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:	DEPENDENTS (OF DEBTOR AND	SPOUSE		
Married	RELATIONSHIP(S): Granddaughter Daughter Daughter		*		
Employment:	DEBTOR		SPOUSE		
	ruck Driver	State Teste	d Nurses Aid		
	JS Express	Scioto Retir	rement		
C I I	.5 year	11 months			
	080 Jenkins Road Chattanooga, TN 37421	433 Obetz F Columbus,			
INCOME: (Estimate of average or pr	rojected monthly income at time case filed)		DEBTOR		SPOUSE
1. Monthly gross wages, salary, and c	commissions (Prorate if not paid monthly)	\$	4,000.00	\$	1,617.92
2. Estimate monthly overtime		\$	0.00	\$	0.00
3. SUBTOTAL		\$	4,000.00	\$	1,617.92
4. LESS PAYROLL DEDUCTIONS					
a. Payroll taxes and social secur	rity	\$	1,119.43	\$	359.93
b. Insurance		\$	188.93	\$	0.00
c. Union dues		\$	0.00	\$	0.00
d. Other (Specify) See I	Detailed Income Attachment	\$	778.17	\$	0.00
5. SUBTOTAL OF PAYROLL DED	UCTIONS	\$	2,086.53	\$	359.93
6. TOTAL NET MONTHLY TAKE I	HOME PAY	\$	1,913.47	\$	1,257.99
7. Regular income from operation of	business or profession or farm (Attach detailed state	ement) \$	0.00	\$	0.00
8. Income from real property		\$	0.00	\$	0.00
9. Interest and dividends 10. Alimony, maintenance or support	payments payable to the debtor for the debtor's use	\$ or that of	0.00	\$	0.00
dependents listed above		\$	0.00	\$	0.00
11. Social security or government ass (Specify):	istance	\$	0.00	\$	0.00
		\$	0.00	\$	0.00
12. Pension or retirement income		\$	0.00	\$	0.00
13. Other monthly income (Specify):		\$	0.00	\$	0.00
		\$	0.00	\$	0.00
14. SUBTOTAL OF LINES 7 THRO	UGH 13	\$	0.00	\$	0.00
15. AVERAGE MONTHLY INCOM	E (Add amounts shown on lines 6 and 14)	\$	1,913.47	\$	1,257.99
16. COMBINED AVERAGE MONT	HLY INCOME: (Combine column totals from line	15)	\$	3,171.	.46

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

Debtor Husband has not been getting as many miles as during the six month average.

In re	Barry S Staley Denise Brown-Staley		Case No.	
		Debtor(s)		

$\underline{\textbf{SCHEDULE I-CURRENT INCOME OF INDIVIDUAL DEBTOR(S)}}$

Detailed Income Attachment

Other Payroll Deductions:

Child Support	 691.00	\$ 0.00
Service Fee	\$ 36.00	\$ 0.00
Short Term Disability	\$ 16.51	\$ 0.00
Long Term Disability	\$ 34.66	\$ 0.00
Total Other Payroll Deductions	\$ 778.17	\$ 0.00

In re	Barry S Staley Denise Brown-Staley		Case No.	
		Debtor(s)	-	

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complexpenditures labeled "Spouse."	ete a separate	e schedule of
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	381.00
a. Are real estate taxes included? Yes No _X_		
b. Is property insurance included? Yes No _X_		
2. Utilities: a. Electricity and heating fuel	\$	200.00
b. Water and sewer	\$	0.00
c. Telephone	\$	100.00
d. Other Cable and/or internet	\$	85.00
3. Home maintenance (repairs and upkeep)	\$	50.00
4. Food	\$	600.00
5. Clothing	\$	100.00
6. Laundry and dry cleaning	\$	30.00
7. Medical and dental expenses	\$	50.00
8. Transportation (not including car payments)	\$	351.46
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	0.00
10. Charitable contributions	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	0.00
b. Life	\$	15.00
c. Health	\$	0.00
d. Auto	\$	64.00
e. Other	\$	0.00
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify)	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the		
plan)	¢.	0.00
a. Auto	\$	70.00
b. Other Storage	\$	
c. Other	\$	0.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other See Detailed Expense Attachment	\$	695.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	2,791.46
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year		
following the filing of this document:		
None known at this time.		
20. STATEMENT OF MONTHLY NET INCOME	_	
	¢	3,171.46
a. Average monthly income from Line 15 of Schedule I	\$ \$	2,791.46
b. Average monthly expenses from Line 18 above c. Monthly net income (a. minus b.)	Φ	380.00
C. PRODUTE RECUITE (4. HITTUS D.)	LD.	JUU.UU

B6J (Official Form 6J)	(12)	(07)
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In re

Barry S Staley Denise Brown-Staley

Case No.	

Debtor(s)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S) Detailed Expense Attachment

Other Expenditures:

Personal Grooming	\$	100.00
Diapers / Formula for Granddaughter	<u> </u>	100.00
Phone for over the road	<u> </u>	280.00
Food on the Road	<u> </u>	150.00
Travel Luandry	<u> </u>	15.00
Travel Hygene	\$	50.00
Total Other Expenditures	\$	695.00

United States Bankruptcy Court Southern District of Ohio

In re	Barry S Staley Denise Brown-Staley		Case No.	
		Debtor(s)	Chapter	13

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

			ad the foregoing summary and schedules, consisting of est of my knowledge, information, and belief.
Date	December 10, 2007	Signature	/s/ Barry S Staley Barry S Staley Debtor
Date	December 10, 2007	Signature	/s/ Denise Brown-Staley Denise Brown-Staley Joint Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

United States Bankruptcy Court Southern District of Ohio

	204			
In re	Barry S Staley Denise Brown-Staley		Case No.	
III IC	Define Brown-Statey	Debtor(s)	Chapter	13
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR DI	EBTOR(S)
cc	ursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule ompensation paid to me within one year before the filing erendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptc	y, or agreed to be pa	id to me, for services rendered or to
	For legal services, I have agreed to accept		\$	3,000.00
	Prior to the filing of this statement I have received		\$	500.00
	Balance Due		\$	2,500.00
2. \$_	274.00 of the filing fee has been paid.			
3. TI	he source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4. TI	he source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	I have not agreed to share the above-disclosed compe	nsation with any other person	unless they are mem	bers and associates of my law firm.
	I have agreed to share the above-disclosed compensat copy of the agreement, together with a list of the name			
a. b. c. d.	Analysis of the debtor's financial situation, and render. Preparation and filing of any petition, schedules, stated Representation of the debtor at the meeting of creditor [Other provisions as needed] a. Analysis of the debtor's financial situate determining whether to file a petition in b. Exemption planning; c. Due dilligence review of information p. d. Preparation and filing any petition, schemay be required; e. Representation of the debtor at the meand adjourned hearings thereof. d. Review of claims and the filing of objective in the second state of the debtor at the meand adjourned hearings thereof.	ing advice to the debtor in det ment of affairs and plan which is and confirmation hearing, an ation, and rendering advice bankruptcy; provided by debtor; hedules, statement of affa eeting of creditors and co ections to claims creating	ermining whether to a may be required; and any adjourned here to the debtor in the deb	file a petition in bankruptcy; urings thereof; ch
7. B ₂	y agreement with the debtor(s), the above-disclosed fee a. Preparation or certification of reaffirm b. Representation of the debtors in any cother contested matters or adversary pro	ation agreements; dischargeability actions, I		elief from stay actions, or any
	other competed matters of datersary pro	CERTIFICATION		
	certify that the foregoing is a complete statement of any nkruptcy proceeding.		payment to me for r	epresentation of the debtor(s) in
Dated:	December 10, 2007	/s/ Michael A. Co Michael A. Cox 0 Hall, Guerrieri & 2500 N. High Stre Suite 100 Columbus, OH 4: (614) 267-2871 F	075218 Cox eet 3202 Fax: (614) 267-287	3

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF OHIO

NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of Attorney

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Michael A. Cox 0075218	X /s/ Michael A. Cox	December 10, 2007						
Printed Name of Attorney	Signature of Attorney	Date						
Address:								
2500 N. High Street								
Suite 100								
Columbus, OH 43202								
(614) 267-2871								
Certificate of Debtor I (We), the debtor(s), affirm that I (we) have received and read this notice.								
- (· · · · ·),								
Barry S Staley								
Denise Brown-Staley	X /s/ Barry S Staley	December 10, 2007						
Printed Name of Debtor	Signature of Debtor	Date						
Cose No (if Imayım)	V Jol Danica Brown Staley	December 40, 2007						
Case No. (if known)	X /s/ Denise Brown-Staley	December 10, 2007						
	Signature of Joint Debtor (if any)	Date						

Afni, Inc. 404 Brock Dr. P.O. Box 3427 Bloomington, IL 61702

Allied Interstate 3200 Norhtline Avenue Suite 160 Greensboro, NC 27408

Allied Interstate 3000 Corporate Exchange Dr. Columbus, OH 43231

American Electric Power P.O. Box 24418 Canton, OH 44701-4418

Andrew J. Conti 4694 Cemetary Road Box 282 Hilliard, OH 43026

Asset Acceptance LLC P.O. Box 2036 Warren, MI 48090

AssetCare, Inc. 5100 Peachtree Industrial Blvd. Norcross, GA 30071

AT&T Bankruptcy Department P.O. Box 769 Arlington, TX 76004

Calvary Portfolio Services 7 Skyline Dr 3rd Floor Hawthorne, NY 10532

Cen Oh Cred 2040 Brice Rd Box 210 Reynoldsburg, OH 43068

Cheek & Zeehandler 471 E. Broad Street 12th Floor Columbus, OH 43215

Children's Hospital P.O. Bopx 182888 Columbus, OH 43218-2888 Columbia Gas of Ohio 200 Civic Center Dr., 11th Floor Columbus, OH 43215

Columbus City Treasurer Income Tax Division, 4th Floor 50 W. Gay St. Columbus, OH 43215

Computer Collections Inc. 640 West Fourth Street P.O. Box 5238 Winston Salem, NC 27113-5238

Credit Protection Association PO Box 9037 Addison, TX 75001

Dana & Pariser Co., LPA 800 E. Broad St. Columbus, OH 43205

Danapariser 800 East Broad Str Columbus, OH 43205

Department of Veterans Affairs P.O. Box 530269 Atlanta, GA 30353-0268

Driver Solutions Inc 3603 E Raymond St Indianapolis, IN 46203

Federal Adjustment Bur 4640 Executive Dr Columbus, OH 43220

FFCC-Columbus 1550 Old Henderson Rd. Suite 100 Columbus, OH 43220-3626

Ffcc-columbus Inc 1550 Old Henderson Rd St Columbus, OH 43220

Fifth Third PO Box 182026 Columbus, OH 43218

First American Cash Advance 3329 E. Broad Street Columbus, OH 43213 First National Collection Bureau 610 Waltham Way Sparks, NV 89434

Florida Child Support Enforcement Agency 703B West 15th Street Panama City, FL 32401

Grant Medical Center 3728 Olentangy River Rd. Columbus, OH 43260

H & R Block 3737 N. High St. Columbus, OH 43214

H & S Financial 804 Office Park Cir Lewisville, TX 75057

HRRG
PO Box 189053
Fort Lauderdale, FL 33318-9053

Internal Revenue Service PO BOX 970024 Saint Louis, MO 63197-7364

Island National Group 6851 Jericho Turnpike Suite 180 Syosset, NY 11791

Island National Group LLC PO Box 18009 Hauppauge, NY 11788-8809

LVNV Funding PO Box 10497 Greenville, SC 29603

Martel Management 5 East Long St. Columbus, OH 43216

Michael Igoe PO Box 20430 Columbus, OH 43215

Michaels Auto Sales 1766 Parsons Ave. Columbus, OH 43207 Mona Auto Sales 1484 Parsons Ave. Columbus, OH 43207

NCO - Medclr Po Box 41567 Philadelphia, PA 19101

NCO Financial 507 Prudential Rd Horsham, PA 19044

Ohio Health 3728 Olentangy River Road Columbus, OH 43214

Osi Collect/collection Agency 5626 Frantz Rd Dublin, OH 43017

OSU Radiology, LLC PO Box 634129 Cincinnati, OH 45263-4129

Park Dansan Collections Po Box 248 Gastonia, NC 28053

Patient Financial Services 1375 Perry St. Columbus, OH 43201-3177

Pinnacle Financial Group, Inc. 7825 Washington Ave. S., Suite 410 Minneapolis, MN 55439

RJM Acquisition Funding 575 Underhill Blvd. Suite 2 Syosset, NY 11791

Rossman & Co Po Box 29917 Columbus, OH 43229

SBC Bankruptcy Department P.O. Box 769 Arlington, TX 76004

Sprint
Bankruptcy Department
6391 Sprint Pkwy
Shawnee Mission, KS 66251-2800

Timer Warner Communications Credit Department P.O. Box 2553 Columbus, OH 43216-2553

Trinsic 100 Brookwood Road Atmore, AL 36502-3513

United Auto Credit Co 17752 Sky Park Cir Ste 1 Irvine, CA 92614

United Collection Bureau Po Box 140190 Attn: Customr Service Toledo, OH 43614

United Collection Bureau Po Box 140190 Toledo, OH 43614

United Collection Bureau PO Box 165009 Columbus, OH 43216-5009

United Healthcare Insurance Company PO BOX 981502 El Paso, TX 79998-1502

US Bank, NA
Bankruptcy/Recovery Dept
PO Box 5229
Cincinnati, OH 45201

Us Dept Of Education Po Box 5609 Greenville, TX 75403

West Asset Management Po Box 2308 Sherman, TX 75091

Whitehall Medical Center 100 W. Third Ave. Columbus, OH 43201

Form 22C (Chapter 13) (04/07)

	Barry S Staley	According to the calculations required by this statement:
In re	Denise Brown-Staley	■ The applicable commitment period is 3 years.
	Debtor(s)	☐ The applicable commitment period is 5 years.
Case N	Number:(If known)	☐ Disposable income is determined under § 1325(b)(3).
	(ii kiletii)	■ Disposable income is not determined under § 1325(b)(3).
		(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual Chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

		Part	1. F	REPORT OF	INCOME					
	Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.									
1	a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10.									
	b. Married. Complete	both Column A ("Deb	otor's l	ncome") and Col	umn B ("Spouse's	ncom	e") f	or Lines 2-10).	
	All figures must reflect av							olumn A		Column B
	calendar months prior to					the				
	filing. If the amount of m month total by six, and e				nust divide the six-			Debtor's Income		Spouse's Income
		<u> </u>								
2	Gross wages, salary, ti						\$	4,384.55	\$	1,617.92
	Income from the opera and enter the difference i									
	zero. Do not include ar									
	in Part IV.									
3	a Cross ressints		\$	Debtor	Spouse					
	a. Gross receiptsb. Ordinary and nece	essary business expense		0.00		.00				
	c. Business income	ssaly busiliess expelise		btract Line b from L				0.00	\$	0.00
	Rents and other real p	ronarty incoma. Subtr					\$	0.00	\$	0.00
	the appropriate column(s									
	part of the business ex	penses entered on Li	ne b a		T					
4				Debtor	Spouse					
	a. Gross receiptsb. Ordinary and nece	essary operating expense	\$ es \$	0.00		.00				
	,	al property income		ubtract Line b from		.00		0.00		0.00
	-		3	abtract Line b ironi	Line a		\$			
5	Interest, dividends, an	d royalties.				- 1	\$	0.00	\$	0.00
6	Pension and retiremen	t income.					\$	0.00	\$	0.00
_	Any amounts paid by a	•	<i>J</i> .							
7	expenses of the debtor not include amounts paid			s, including child (or spousai support		\$	0.00	\$	0.00
	Unemployment compe	<u> </u>		he appropriate colu	mn(s) of Line 8.		Ψ	0.00	Ψ	0.00
	However, if you contend									
8	benefit under the Social S but instead state the amo			ount of such compe	nsation in Column A	or B,				
	Unemployment compens									
	be a benefit under the S		otor \$	0.00 Sp	ouse \$.00	\$	0.00	\$	0.00
	Income from all other	sources. Specify sourc	e and a			rces	Ψ	0.00	Ψ	0.00
	on a separate page. Tota	al and enter on Line 9. [Do not	include any benef	its received under th	Э				
	Social Security Act or payments received as a victim of a war crime, crime against humanity, or as victim of international or domestic terrorism.				as a					
9	victim of international of	domestic terrorism.		Debtor	Spouse					
	a. child support		\$	0.00	\$ 184	.17				
	b.		\$		\$		\$	0.00	\$	184.17
10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in			9 in		4 204 55		4 000 00		
	Column B. Enter the total(s).					\$	4,384.55	\$	1,802.09	
11	Total. If Column B has the total. If Column B has						\$			6,186.64
1	totan n oolunni bila	2001. Joinplotod, C		II OIII LIIIC						,

	Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PERIO				
12	Enter the amount from Line 11	\$	6,186.64		
13	Marital Adjustment. If you are married, but are not filing jointly with your spouse, AND if you contend that calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of your spouse, enter the amount of the income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of you or your dependents. Otherwise, enter zero.	\$	0.00		
14	Subtract Line 13 from Line 12 and enter the result.	\$	6,186.64		
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number 12 and enter the result.	\$	74,239.68		
16	Applicable median family income. Enter the median family income for applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)				
	a. Enter debtor's state of residence: OH b. Enter debtor's household size: 5	\$	75,479.00		
17	Application of § 1325(b) (4). Check the applicable box and proceed as directed. The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitment period is years" at the top of page 1 of this statement and continue with this statement. The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitment per 5 years" at the top of page 1 of this statement and continue with this statement.				
Par	t III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSAB	LE I	NCOME		
18	Enter the amount from Line 11.	\$	6,186.64		
19	Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter the amount of the income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of you or your dependents. If you are unmarried or married and filing jointly with your spouse, enter zero.	\$	0.00		
20	Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.	\$	6,186.64		
21	Annualized current monthly income for § 1325(b)(3). Multiply the amount from Line 20 by the number 12 and enter the result.	\$	74,239.68		
22	Applicable median family income. Enter the amount from Line 16.	\$	75,479.00		
	Application of § 1325(b)(3). Check the applicable box and proceed as directed.				
23	☐ The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income § 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement.	is det	ermined under		
	■ The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable in determined under § 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do IV, V, or VI.				

	Part IV. CALCULATION OF DEDUCTIONS ALLOWED UNDER § 707(b)(2)					
	Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)					
24	National Standards: food, clothing, household supplies, personal care, and miscellaneous. Enter the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable family size and income level. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	\$				
25A	Local Standards: housing and utilities; non-mortgage expenses. Enter amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court).	\$				

Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the Basis for your contention in the space below. Local Standards: transportation: vehicle operation/public transportation expenses. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. O	25B	Local Standards: housing and utilities; mortgage/rent exof the IRS Housing and Utilities Standards; mortgage/rent expense for y available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy cour Monthly Payments for any debts secured by your home, as stated in Line result in Line 25B. Do not enter an amount less than zero. a. IRS Housing and Utilities Standards; mortgage/rent Expense b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47	our county and family size (this information is rt); enter on Line b the total of the Average			
25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Is a standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below: Coal Standards: transportation: Vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. O				\$		
volu are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. □ □ □ □ □ □ 2 or more. Enter the amount from IRS Transportation Standards, Operating Costs & Public Transportation Costs for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) □ □ □ 2 or more. Enter, in Line a below, the amount of the IRS Transportation Standards, Ownership Costs, First Car (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court): enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28. Enter, in Line a below, the amount of the IRS Transportation Standards, Ownership Costs, Second Car (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court): enter in Line b the total of the Average Monthly Payment for any debts secured by Vehicle 2. a. IRS Transportation Standards, Ownership Costs, Second Car Standards, Ownership/lease expense for Vehicle 2. a. IRS Transportation Standards, Ownership Costs, Second Car Standards, Ownership/lease expense for Vehicle 2. a. IRS Transportation Standards, Ownership Costs, Second Car Standards, Ownership/lease expens	26	Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:				
included as a contribution to your household expenses in Line 7. 0		You are entitled to an expense allowance in this category regardless of wehicle and regardless of whether you use public transportation.	whether you pay the expenses of operating a			
Enter the amount from IRS Transportation Standards, Operating Costs & Public Transportation Costs for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) 1	27	included as a contribution to your household expenses in Line 7.	or for which the operating expenses are			
number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) 1		□ 0 □ 1 □ 2 or more.				
vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) 1 1 2 or more. Enter, in Line a below, the amount of the IRS Transportation Standards, Ownership Costs, First Car (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs, First Car \$ Average Monthly Payment for any debts secured by Vehicle 1, b. as stated in Line 47 c. Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a. Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28. Enter, in Line a below, the amount of the IRS Transportation Standards, Ownership Costs, Second Car (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs, Second Car \$ Average Monthly Payment for any debts secured by Vehicle 2, b. as stated in Line 47 c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a. Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all		number of vehicles in the applicable Metropolitan Statistical Area or Cens	\$			
Average Monthly Payment for any debts secured by Vehicle 1, b. as stated in Line 47 c. Net ownership/lease expense for Vehicle 1 Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28. Enter, in Line a below, the amount of the IRS Transportation Standards, Ownership Costs, Second Car (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs, Second Car \$ Average Monthly Payment for any debts secured by Vehicle 2, b. as stated in Line 47 c. Net ownership/lease expense for Vehicle 2 Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all	28	vehicles for which you claim an ownership/lease expense. (You may not than two vehicles.) 1 1 2 or more. Enter, in Line a below, the amount of the IRS Transportation Standards www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Payments for any debts secured by Vehicle 1, as stated in Line 47; subtr	claim an ownership/lease expense for more , Ownership Costs, First Car (available at Line b the total of the Average Monthly			
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c. Net ownership/lease expense for Vehicle 1 Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28. Enter, in Line a below, the amount of the IRS Transportation Standards, Ownership Costs, Second Car (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs, Second Car \$ Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2 Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all			\$			
you checked the "2 or more" Box in Line 28. Enter, in Line a below, the amount of the IRS Transportation Standards, Ownership Costs, Second Car (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs, Second Car \$			Subtract Line b from Line a.	\$		
Average Monthly Payment for any debts secured by Vehicle 2, b. as stated in Line 47 c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a. Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all	29	you checked the "2 or more" Box in Line 28. Enter, in Line a below, the amount of the IRS Transportation Standards www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Payments for any debts secured by Vehicle 2, as stated in Line 47; subtr	, Ownership Costs, Second Car (available at Line b the total of the Average Monthly			
b. as stated in Line 47 \$ c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a. Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all			\$			
Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all		b. as stated in Line 47	\$			
		c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$		
social security taxes, and Medicare taxes. Do not include real estate or sales taxes.	30	federal, state, and local taxes, other than real estate and sales taxes, su	ich as income taxes, self employment taxes,	\$		
Other Necessary Expenses: mandatory payroll deductions. Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as non-mandatory 401(k) contributions.	31	deductions that are required for your employment, such as mandatory re	etirement contributions, union dues, and			

Other Necessary Expenses: education for employments or for a physically or mentally challenged children and the second of children such as a possible or experience of the second of the	32	Other Necessary Expenses: life insurance. Enter average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for now other form of insurance.			
Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total monthly amount that you actually expend for education that is a condition of employment and for adduction that is a condition of one progressive and the condition of employment and for adduction that is a condition of one progressive and the condition of the cond	33	required to pay pursuant to court order, such as spousal or child support payments. Do not include payments on			\$
childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the average monthly amount that you actually person on health care expenses that are not reimbursed by insurance or paid by a health savings account. Do not include payments for health insurance listed in Line 39. Other Necessary Expenses: telecommunication services. Enter the average monthly amount that you actually pay for telecommunication services other than your basic home telephone service - such as cell phones, pages, call waiting, caller ids, special long distance, or internet service- to the extent necessary to your health and welfare or that of your dependents. Do not include any amount previously deducted. 38 Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37. Subpart B: Additional Expense Deductions under § 707 (b) Note: Do not include any expenses that you have listed in Lines 24-37. Health Insurance, Disability Insurance, and Health Savings Account Expenses. List and total the average monthly amounts that you actually pay for yourself, your spouse, or your dependents in the following categories. 39 Health Insurance \$ Disability Insurance	34	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no			
health care expenses that are not reimbursed by insurance or paid by a health savings account. Do not include payments for health insurance listed in Line 39. Other Necessary Expenses: telecommunication services. Enter the average monthly amount that you actually pay for telecommunication services other than your basic home telephone service - such as cell phones, pages, call waiting, caller ids, seed long distance, or internet service-to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. Subpart B: Additional Expense Deductions under § 707(b) Note: Do not include any expenses that you have listed in Lines 24-37 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List and total the average monthly amounts that you actually pay for yourseir, your spouse, or your dependents in the following categories. a. Health Insurance \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	35				\$
Other Necessary Expenses: telecommunication services. Enter the average monthly amount that you actually pay for telecommunication services other than your basic home telephone service - such as cell phones, pagers, call waiting, caller id. special long distance, or internet service-to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. 38 Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37. Subpart B: Additional Expense Deductions under § 707(b) Note: Do not include any expenses that you have listed in Lines 24-37 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List and total the average monthly amounts that you actually pay for yourself, your spouse, or your dependents in the following categories. a. Health Insurance \$ b. Disability Insurance \$ c. Health Savings Account \$ c. H	36	health care expenses that are not reimbursed by insurance or paid by a health savings account. Do not include			\$
Subpart B: Additional Expense Deductions under § 707 (b) Note: Do not include any expenses that you have listed in Lines 24-37 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List and total the average monthly amounts that you actually pay for yourself, your spouse, or your dependents in the following categories. 39 a. Health Insurance b. Disability Insurance c. Health Savings Account state of the least of the	37	Other Necessary Expenses: telecommunication services. Enter the average monthly amount that you actually pay for telecommunication services other than your basic home telephone service - such as cell phones, pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your health and			
Subpart B: Additional Expense Deductions under § 707(b) Note: Do not include any expenses that you have listed in Lines 24-37 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List and total the average monthly amounts that you actually pay for yourself, your spouse, or your dependents in the following categories. A	38	Total E	xpenses Allowed under IRS Standards	Enter the total of Lines 24 through 37.	\$
Health Insurance, Disability Insurance, and Health Savings Account Expenses. List and total the average monthly amounts that you actually pay for yourself, your spouse, or your dependents in the following categories. A		ı	Subpart B: Additional F	xpense Deductions under § 707(h)	T *
the average monthly amounts that you actually pay for yourself, your spouse, or your dependents in the following categories: a. Health Insurance \$ b. Disability Insurance \$ c. Health Savings Account \$ Total: Add Lines a, b, and c Continued contributions to the care of household or family members. Enter the actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34. Protection against family violence. Enter any average monthly expenses that you actually incurred to maintain the safety of your family under the family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the average monthly expenses that you actually incur, not to exceed \$137.50 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed fiving persense exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed fiving persense exceed the combined allowances for food and apparel in th			·		
b. Disability Insurance c. Health Savings Account 5 Continued contributions to the care of household or family members. Enter the actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Protection against family violence. Enter any average monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the average monthly expenses that you actually incur, not to exceed \$137.50 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. 45 Continued charitable contributions. Enter the amount that you will continue to contribute i	the average monthly amounts that you actually pay for yours				
C. Health Savings Account S Total: Add Lines a, b, and c Continued contributions to the care of household or family members. Enter the actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34. Protection against family violence. Enter any average monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the average monthly expenses that you actually incur, not to exceed \$137.50 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptic court.) You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Continued charitable contributions. Enter the	39	a.	Health Insurance	\$	
Continued contributions to the care of household or family members. Enter the actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34. Protection against family violence. Enter any average monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the average monthly expenses that you actually incur, not to exceed \$137.50 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances (This information is available at www.usdoj.gov/ust/or from the clerk of the bankruptcy court.) You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charita		b.	Disability Insurance	\$	
Continued contributions to the care of household or family members. Enter the actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34. Protection against family violence. Enter any average monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the average monthly amount, in excess of the allowance specified by IRS Local standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the average monthly expenses that you actually incur, not to exceed \$137.50 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances. (This information is available at wuxu used) gov/ust/ or from the clerk of the bankruptcy court.) You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a char		C.	Health Savings Account	\$	
expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. So no not include payments listed in Line 34. Protection against family violence. Enter any average monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the average monthly expenses that you actually incur, not to exceed \$137.50 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(Total: Add Lines a, b, and c	\$
Protection against family violence. Enter any average monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the average monthly expenses that you actually incur, not to exceed \$137.50 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).	40	expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.			\$
Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the average monthly expenses that you actually incur, not to exceed \$137.50 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).	41	maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal			\$
Education expenses for dependent children less than 18. Enter the average monthly expenses that you actually incur, not to exceed \$137.50 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).	42	Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and			¢
expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Total Additional Expense Doductions under § 707(b). Enter the total of lines 30 through 45.	43	Education expenses for dependent children less than 18. Enter the average monthly expenses that you actually incur, not to exceed \$137.50 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the			
cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).	44	expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must provide your case trustee with documentation demonstrating that the			\$
46 Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45.	45				\$
	46	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45.			\$

	Sı	ubpart C: Deductions for Deb	t Payment	
47	Future payments on secured c you own, list the name of creditor, iden The Average Monthly Payment is the to following the filing of the bankruptcy ca insurance required by the mortgage. If	tate the Average Monthly Payment. ch Secured Creditor in the 60 months d include payments of taxes and		
	Name of Creditor a.	Property Securing the Debt	60-month Average Payment \$ Total: Add Lines	\$
48	Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments.			
	Name of Creditor a.	Property Securing the Debt	1/60th of the Cure Amount \$ Total: Add Lines	\$
49	Payments on priority claims. Enter the total amount of all priority claims (including priority child support and alimony claims), divided by 60.			\$
	Chapter 13 administrative expresulting administrative expense.			
50	a. Projected average monthly Chapter 13 plan payment. b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) c. Average monthly administrative expense of Chapter 13 case Total: Multiply Lines a and b			\$
51	Total Deductions for Debt Payment. Enter the total of Lines 47 through 50.			
	Subpart D	ว: Total Deductions Allowed เ	under § 707(b)(2)	•
52	Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 38, 46, and 51.			

Part V. DETERMINATION OF DISPOSABLE INCOME UNDER § 1325(b)(2)			
53	Total current monthly income. Enter the amount from Line 20.		
54	Support income. Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, included in Line 7, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child.	\$	
55	Qualified retirement deductions. Enter the monthly average of (a) all contributions or wage deductions made to qualified retirement plans, as specified in § 541(b)(7) and (b) all repayments of loans from retirement plans, as specified in § 362(b)(19).	\$	
56	Total of all deductions allowed under § 707(b)(2). Enter the amount from Line 52.	\$	
57	Total adjustments to determine disposable income. Add the amounts on Lines 54, 55, and 56 and enter the result.	\$	
58	Monthly Disposable Income Under § 1325(b)(2). Subtract Line 57 from Line 53 and enter the result.	\$	

Part VI. ADDITIONAL EXPENSE CLAIMS

Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.

59

	Expense Description	Monthly Amount
a.		\$
b.		\$
C.		\$
d.		\$
li	Total: Add Lines a, b, c and d	\$

Part VII. VERIFICATION				
	I declare under penalty of perjury that the information provided in this statement is true and correct. (If this is a joint case, both a must sign.)			ue and correct. (If this is a joint case, both debtors
	Date:	December 10, 2007	Signature:	/s/ Barry S Staley
60				Barry S Staley (Debtor)
	Date:	December 10, 2007	Signature	/s/ Denise Brown-Staley
				Denise Brown-Staley (Joint Debtor, if any)